DSRIP Chapter Updates

2023-10-09

# TO DO

* ☐ Color pallete
* ☐ Verify dates and years are correct
* ☐ check table when missing
* ☐ Need to add oeq.R from APM to emilys path

# Questions

* Should I change axis on 1.4 from 17, 18, etc to the same DYY (YYYY)

###### Table II.7 RHP participation rates by year

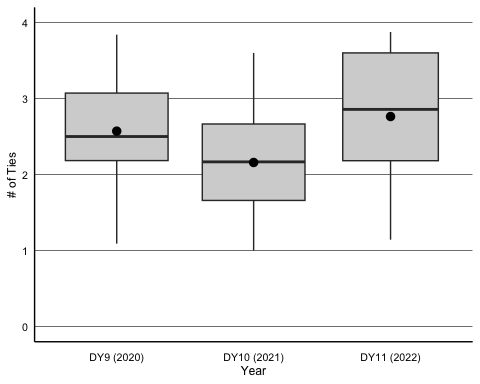
part\_rate

| RHP | DY9 (2020) # | DY9 % | DY10 (2021) # | DY10 % | DY11 (2022) # | DY11 % | Total |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 1 | 17 | 85.0% | 10 | 50.0% | 19 | 95.0% | 20 |
| 2 | 12 | 80.0% | 10 | 66.7% | 13 | 86.7% | 15 |
| 3 | 19 | 76.0% | 18 | 72.0% | 18 | 72.0% | 25 |
| 4 | 13 | 81.2% | 6 | 37.5% | 16 | 100.0% | 16 |
| 5 | 9 | 90.0% | 5 | 50.0% | 7 | 70.0% | 10 |
| 6 | 17 | 77.3% | 16 | 72.7% | 20 | 90.9% | 22 |
| 7 | 7 | 100.0% | 5 | 71.4% | 6 | 85.7% | 7 |
| 8 | 7 | 58.3% | 10 | 83.3% | 10 | 83.3% | 12 |
| 9 | 13 | 59.1% | 19 | 86.4% | 21 | 95.5% | 22 |
| 10 | 15 | 62.5% | 22 | 91.7% | 23 | 95.8% | 24 |
| 11 | 11 | 78.6% | 10 | 71.4% | 13 | 92.9% | 14 |
| 12 | 25 | 73.5% | 22 | 64.7% | 30 | 88.2% | 34 |
| 13 | 10 | 76.9% | 11 | 84.6% | 11 | 84.6% | 13 |
| 14 | 8 | 100.0% | 6 | 75.0% | 7 | 87.5% | 8 |
| 15 | 8 | 100.0% | 5 | 62.5% | 8 | 100.0% | 8 |
| 16 | 7 | 100.0% | 5 | 71.4% | 6 | 85.7% | 7 |
| 17 | 10 | 83.3% | 11 | 91.7% | 11 | 91.7% | 12 |
| 18 | 6 | 100.0% | 6 | 100.0% | 6 | 100.0% | 6 |
| 19 | 9 | 81.8% | 10 | 90.9% | 10 | 90.9% | 11 |
| 20 | 3 | 75.0% | 1 | 25.0% | 4 | 100.0% | 4 |
| Texas | 226 | 77.9% | 208 | 71.7% | 259 | 89.3% | 290 |

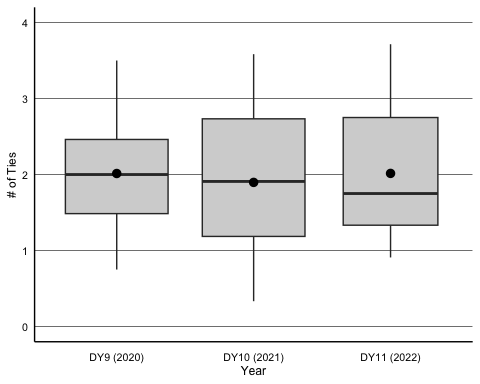
###### Measure 1.1.2

(JSD, RS, DSA)

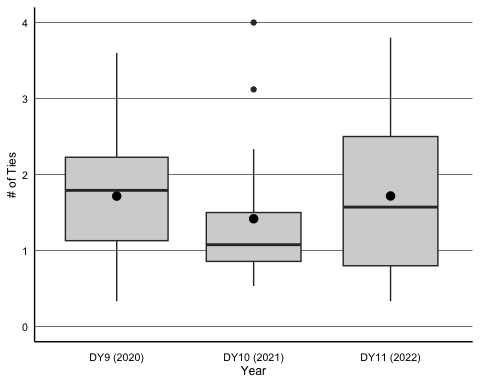
dpm112jsdplot



dpm112trsplot



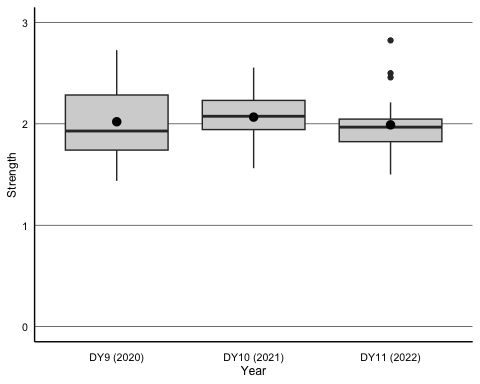
dpm112dsaplot



###### Figure II.3. Strength of network ties

(Measure 1.1.3 - Density)

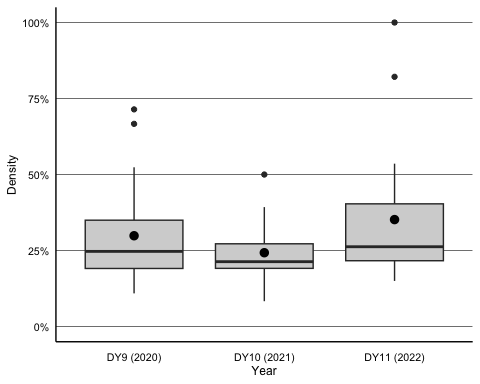
dpm113denplot



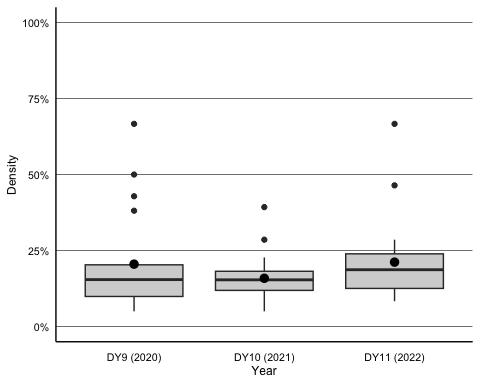
###### Figure II.4. Average density of network ties

(JSD, RS, DSA)

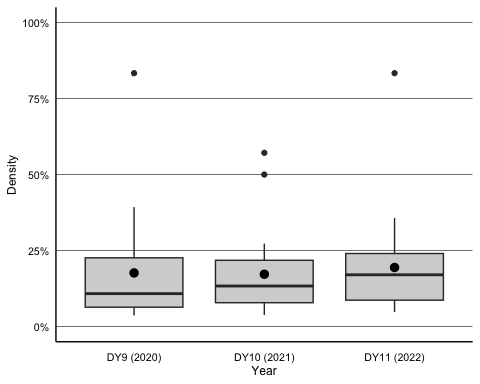
dpm114jsdplot



dpm114trsplot

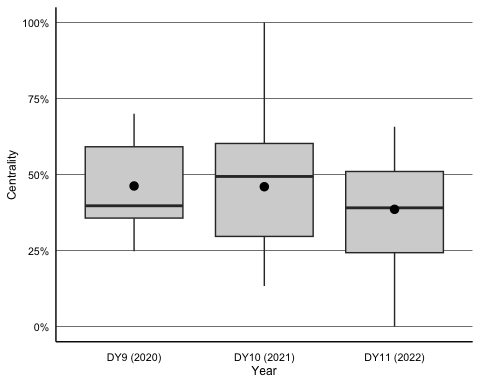


dpm114dsaplot

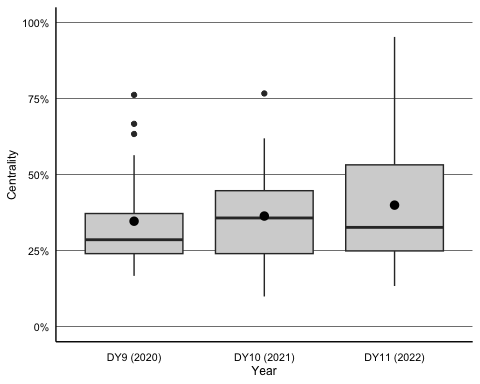


###### Figure II.5. Average centralization of network ties

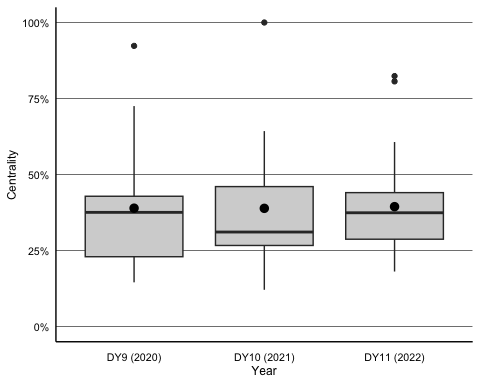
dpm115jsdplot



dpm115trsplot



dpm115dsaplot



## Measure 1.1.6

Attitude toward Collaboration

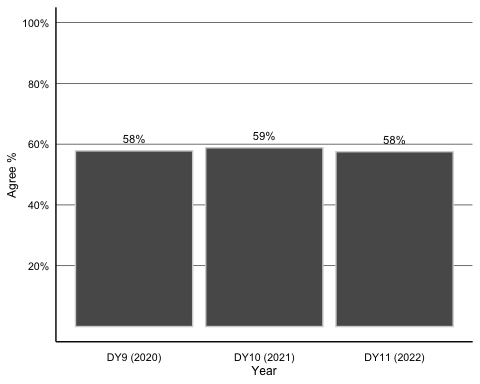
To understand the attitudes of DSRIP-participating providers toward DSRIP’s impact on collaborative relationships, specifically care coordination, providers were asked about the extent to which they agreed or disagreed with the following statements:

• DSRIP has increased the level of care coordination between different DSRIP providers.

• DSRIP has increased the level of care coordination between DSRIP and non-DSRIP providers.

###### DSRIP has increased the level of care coordination between different DSRIP providers.

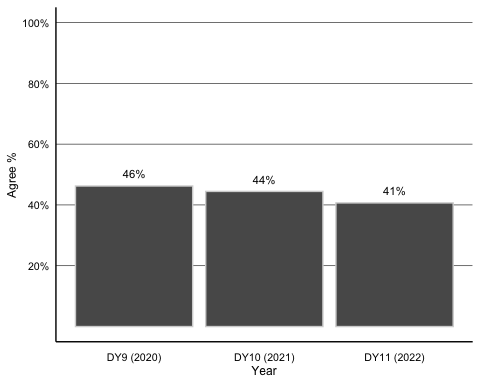
new\_dc1$prim\_vis\_bar\_tot



Difference between 2020 responses and 2022 responses is not statistically significant after conducting Wilcoxon Rank Sum Test (p = 0.952 V = 30795.)

###### DSRIP has increased the level of care coordination between DSRIP and non-DSRIP providers.

new\_dc2$prim\_vis\_bar\_tot



Difference between 2020 responses and 2022 responses is not statistically significant after conducting Wilcoxon Rank Sum Test (p = 0.213 V = 32421.)

###### Table II.11 Health Information Exchanges used by Participating Providers

hie\_other\_oeq

| Organization | DY9 (2020) # | DY9 % | DY10 (2021) # | DY10 % | DY11 (2022) # | DY11 % |
| --- | --- | --- | --- | --- | --- | --- |
| Care- Quality | 0 | 0% | 3 | 4% | 5 | 6% |
| Cerner Direct | 0 | 0% | 4 | 6% | 0 | 0% |
| Commonwell Health Alliance | 3 | 6% | 5 | 8% | 5 | 6% |
| Epic/ Care Everywhere | 4 | 8% | 3 | 4% | 1 | 2% |
| Greater Houston Healthconnect | 14 | 26% | 17 | 28% | 17 | 20% |
| HIE Texas | 1 | 2% | 1 | 2% | 21 | 26% |
| Healthcare Access San Antonio (HASA) | 10 | 20% | 17 | 28% | 18 | 22% |
| Integrated Care Collaboration (ICC) | 1 | 2% | 3 | 4% | 3 | 4% |
| OTHER | 9 | 18% | 1 | 2% | 2 | 2% |
| Pasa Del Norte Health Information Exchange (PHIX) | 6 | 12% | 5 | 8% | 7 | 8% |
| Rio Grand HIE | 4 | 8% | 3 | 4% | 3 | 4% |

Total number of organization counts for 2020 = 52, 2021 = 62, 2022 = 82.

###### Table II.12 Number and percentage of external organizations that provided DSRIP data

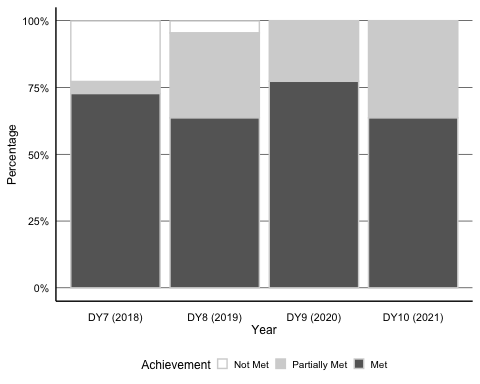
out\_data\_oeq

| Organization | DY9 (2020) # | DY9 % | DY10 (2021) # | DY10 % | DY11 (2022) # | DY11 % |
| --- | --- | --- | --- | --- | --- | --- |
| Community Clinic | 11 | 16% | 8 | 10% | 8 | 12% |
| Contracted Providers | 12 | 18% | 12 | 16% | 11 | 16% |
| Epic | 1 | 2% | 4 | 6% | 2 | 2% |
| Federal Agency | 6 | 8% | 8 | 10% | 8 | 12% |
| Inpatient Data | 3 | 4% | 0 | 0% | 2 | 2% |
| MedicalSchool or University | 4 | 6% | 3 | 4% | 1 | 2% |
| Other | 7 | 10% | 6 | 8% | 7 | 10% |
| Other HIE Network | 3 | 4% | 6 | 8% | 4 | 6% |
| Outpatient Data | 4 | 6% | 5 | 6% | 5 | 8% |
| Regional HIE | 9 | 14% | 5 | 6% | 8 | 12% |
| State Agency | 8 | 12% | 16 | 22% | 11 | 16% |

Total number of organization counts for 2020 = 68, 2021 = 73, 2022 = 67.

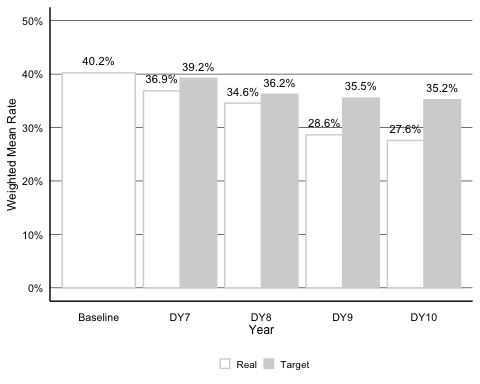
###### Figure II.4 Overall Provider Achievement for A1-508 Rate of ED Visits for Diabetes

m1$prim\_vis



###### Figure II.5 Population Impact: Change in Weighted Mean Rate: A1-508 Rate of ED Visits for Diabetes

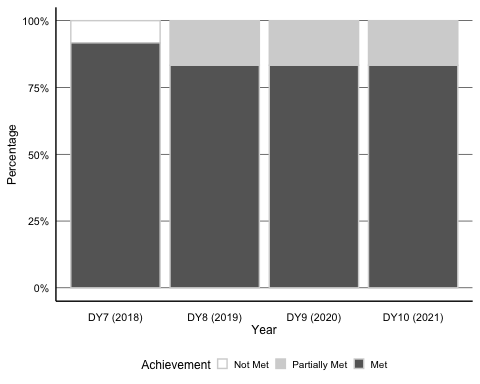
ma1$wt\_fig



Difference between weighted baseline rate and 2021 weighted rate is statistically significant after conducting a Wilcoxon Signed Rank Test (V = 192, p = 0.033).

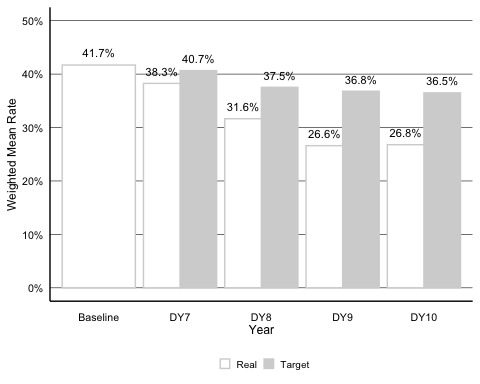
###### Figure II.6 Overall Provider Achievement for A2-509 Rate of ED Visits for CHF, Angina, and Hypertension

m2$prim\_vis



###### Figure II.7 Population Impact: Change in Weighted Mean Rate: A2-509 Rate of ED Visits for CHF, Angina, and Hypertension

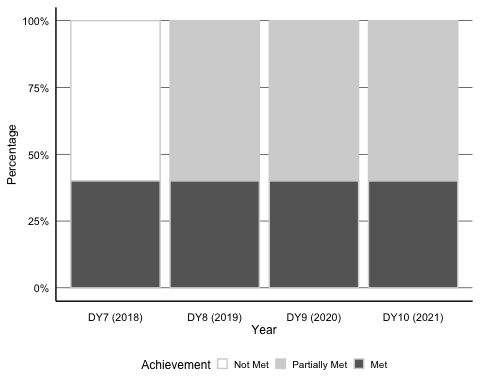
ma2$wt\_fig



Difference between weighted baseline rate and 2021 weighted rate is not statistically significant after conducting a Wilcoxon Signed Rank Test (V = 64, p = 0.052).

###### Figure II.8 Overall Provider Achievement for H2-510 Rate for Behavioral Health and Substance Abuse

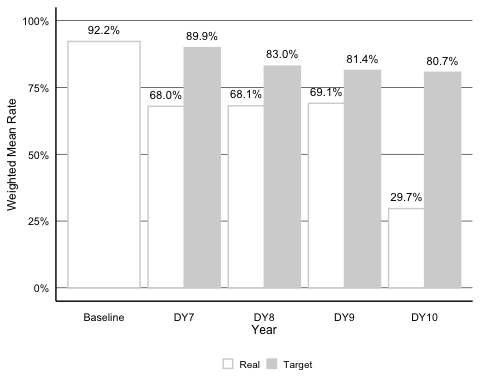
m3$prim\_vis



###### Figure II.9 Population Impact: Change in Weighted Mean Rate: H2-510 Rate for Behavioral Health and Substance Abuse

(Comparison of Real and Target Weighted Mean Rates)

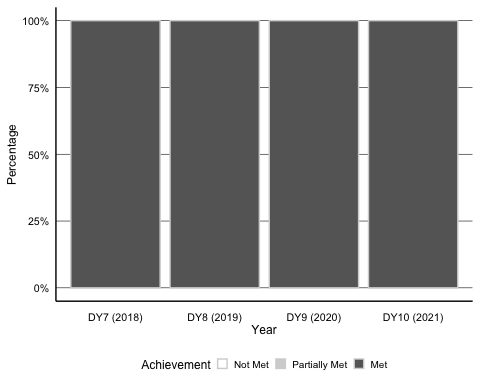
ma3$wt\_fig



Difference between weighted baseline rate and 2021 weighted rate is not statistically significant after conducting a Wilcoxon Signed Rank Test (V = 15, p = 0.062).

###### Figure II.10 Overall Provider Achievement for C1-502 Rate for the Adult Acute Composite Indicator

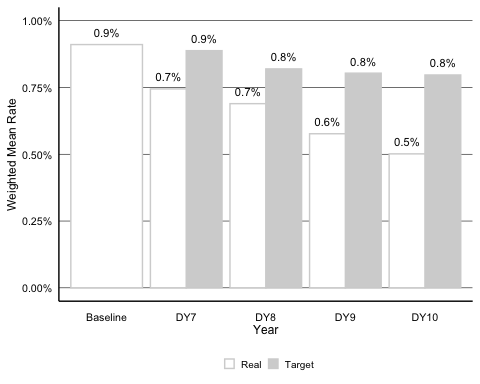
m4$prim\_vis



###### Figure II.11 Population Impact: Change in Weighted Mean Rate: C1-502 Rate for the Adult Acute Composite Indicator

(Comparison of Real and Target Weighted Mean Rates)

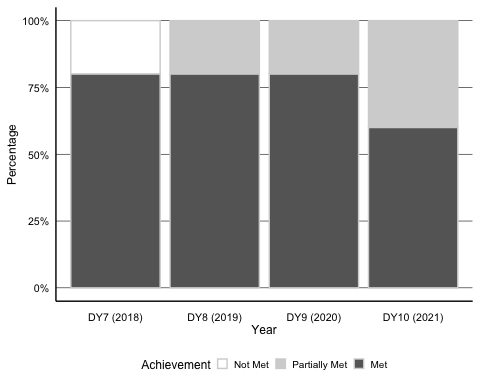
ma4$wt\_fig



Difference between weighted baseline rate and 2021 weighted rate is statistically significant after conducting a Wilcoxon Signed Rank Test (V = 136, p = 0.003).

###### Figure II.12 Overall Provider Achievement for D1-503 Rate for the Child Acute Composite Indicator

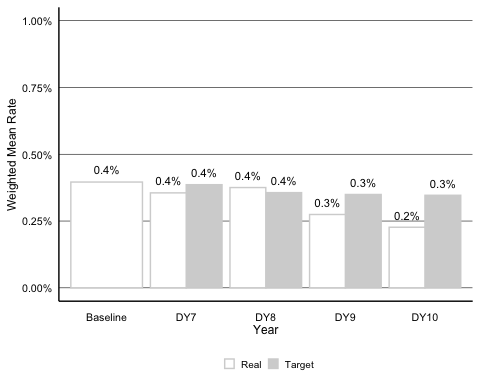
m5$prim\_vis



###### Figure II.13 Population Impact: Change in Weighted Mean Rate: D1-503 Rate for the Child Acute Composite Indicator

(Comparison of Real and Target Weighted Mean Rates)

ma5$wt\_fig

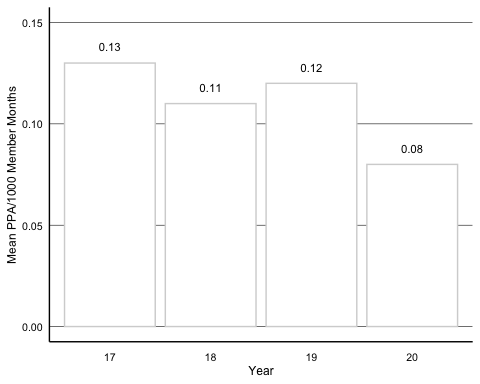


Difference between weighted baseline rate and 2021 weighted rate is not statistically significant after conducting a Wilcoxon Signed Rank Test (V = 41, p = 0.193).

###### Figure II.14 Potentially Preventable Admissions

(PPA) **Change y axis**

ppa\_sum\_graph\_w

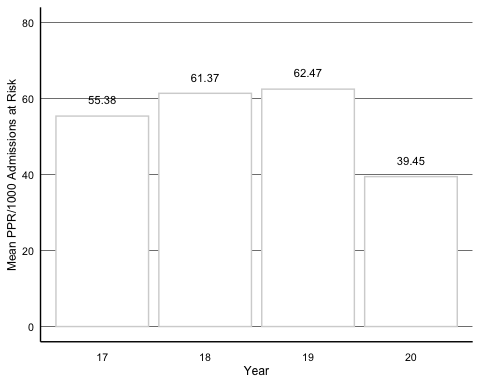


Difference between 2017 and 2020 weighted rates is statistically significant after conducting a Paired Wilcoxon Signed Rank Test (V = 207, p < .05).

###### Figure II.15 Potentially Preventable Readmissions

(PPR)

ppr\_sum\_graph\_w

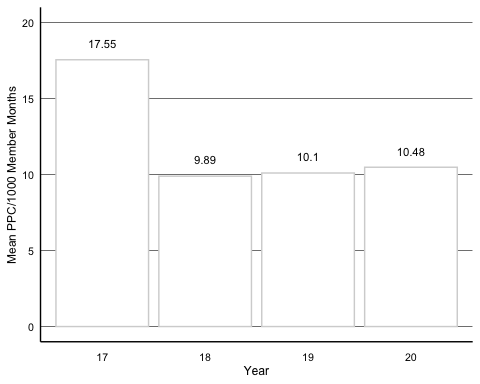


Difference between 2017 and 2020 weighted rates is statistically significant after conducting a Paired Wilcoxon Signed Rank Test (V = 206, p < .05).

###### Figure II.16 Potentially Preventable Complications

(PPC)

ppc\_sum\_graph\_w

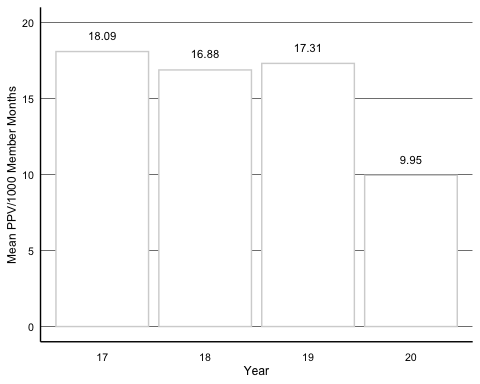


Difference between 2017 and 2020 weighted rates is statistically significant after conducting a Paired Wilcoxon Signed Rank Test (V = 207, p < .05).

###### Figure II.17 Potentially Preventable ED Visits Actual-to-Expected Ratios

(PPV)

ppv\_sum\_graph\_w



Difference between 2017 and 2020 weighted rates is statistically significant after conducting a Paired Wilcoxon Signed Rank Test (V = 210, p < .05).

# Appendix

###### Table B.20 Provider Measure Achievement: A1-508 Rate of ED Visits for Diabetes

###### Rate of Emergency Department Visits for Diabetes (A1-508: DSRIP Category C Measure 1.3.1)

###### Summary Statistics by Year and Measure Achievement: Rate of Emergency Department Visits for Diabetes

m1$summary\_stats

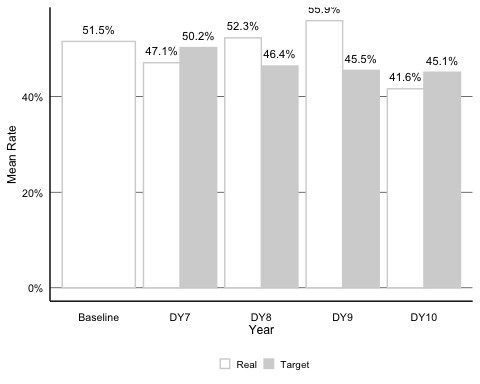
| Measure Achievement | DY7 (2018) # | DY7 % | DY8 (2019) # | DY8 % | DY9 (2020) # | DY9 % | DY10 (2021) # | DY10 % |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Not Met | 5 | 22.7 | 1 | 4.5 | - | - | - | - |
| Partially Met | 1 | 4.5 | 7 | 31.8 | 5 | 22.7 | 8 | 36.4 |
| Met | 16 | 72.7 | 14 | 63.6 | 17 | 77.3 | 14 | 63.6 |

Sample sizes for DY7 (n = 22), DY8 (n = 22), DY9 (n = 22), and DY10 (n = 22).

###### Figure B.6 Change in Unweighted Mean Rate: A1-508 Rate of ED Visits for Diabetes

(Comparison of Real and Target Mean Rates)

ma1$uw\_fig



Difference between baseline rate and 2021 rate is not statistically significant after conducting a Wilcoxon Signed Rank Test (V = 186, p = 0.054).

###### Table B.21 Provider Measure Achievement: A2-509 Rate of ED Visits for CHF, Angina, and Hypertension

###### Summary Statistics by Year and Measure Achievement: Rate of Emergency Department Visits for CHF, Angina, and Hypertension

m2$summary\_stats

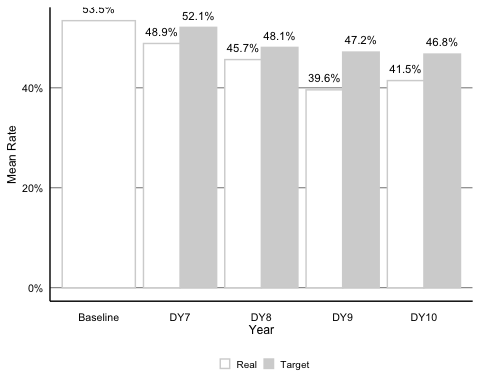
| Measure Achievement | DY7 (2018) # | DY7 % | DY8 (2019) # | DY8 % | DY9 (2020) # | DY9 % | DY10 (2021) # | DY10 % |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Not Met | 1 | 8.3 | - | - | - | - | - | - |
| Met | 11 | 91.7 | 10 | 83.3 | 10 | 83.3 | 10 | 83.3 |
| Partially Met | - | - | 2 | 16.7 | 2 | 16.7 | 2 | 16.7 |

Sample sizes for DY7 (n = 12), DY8 (n = 12), DY9 (n = 12), and DY10 (n = 12).

###### Figure B.3 Change in Unweighted Mean Rate: A2-509 Rate of ED Visits for CHF, Angina, and Hypertension

(Comparison of Real and Target Mean Rates)

ma2$uw\_fig



Difference between baseline rate and 2021 rate is not statistically significant after conducting a Wilcoxon Signed Rank Test (V = 62, p = 0.077).

###### Table B.22 Provider Measure Achievement: H2-510 Rate of Emergency Department Visits for Behavioral Health and Substance Abuse

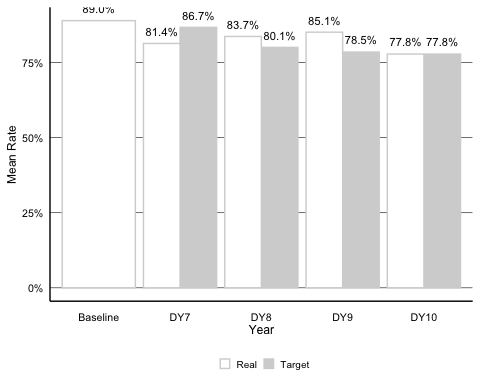
###### Summary Statistics by Year and Measure Achievement: Rate of Emergency Department Visits for Behavioral Health and Substance Abuse

m3$summary\_stats

| Measure Achievement | DY7 (2018) # | DY7 % | DY8 (2019) # | DY8 % | DY9 (2020) # | DY9 % | DY10 (2021) # | DY10 % |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Not Met | 3 | 60 | - | - | - | - | - | - |
| Met | 2 | 40 | 2 | 40 | 2 | 40 | 2 | 40 |
| Partially Met | - | - | 3 | 60 | 3 | 60 | 3 | 60 |

Sample sizes for DY7 (n = 5), DY8 (n = 5), DY9 (n = 5), and DY10 (n = 5). ###### Figure B.4 Change in Unweighted Mean Rate: H2-510 Rate of Emergency Department Visits for Behavioral Health and Substance Abuse (Comparison of Real and Target Mean Rates)

ma3$uw\_fig



Difference between baseline rate and 2021 rate is not statistically significant after conducting a Wilcoxon Signed Rank Test (V = 10, p = 0.625).

###### Table B.23 Provider Measure Achievement: C1-502 PQI 91 Adult Acute Composite Indicator

###### Summary Statistics by Year and Measure Achievement: Prevention Quality Indicator 91: Adult Acute Composite Indicator

m4$summary\_stats

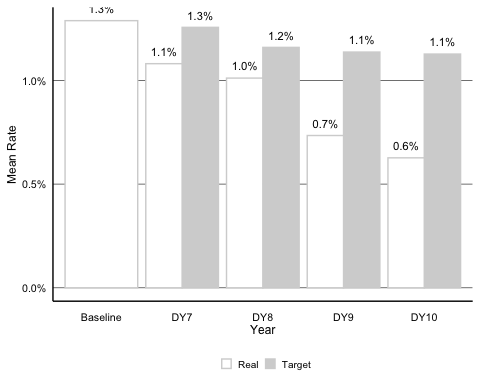
| Measure Achievement | DY7 (2018) # | DY7 % | DY8 (2019) # | DY8 % | DY9 (2020) # | DY9 % | DY10 (2021) # | DY10 % |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Met | 17 | 100 | 17 | 100 | 17 | 100 | 17 | 100 |

Sample sizes for DY7 (n = 17), DY8 (n = 17), DY9 (n = 17), and DY10 (n = 17).

###### Figure B.5 Change in Unweighted Mean Rate: C1-502 PQI 91 Adult Acute Composite Indicator

(Comparison of Real and Target Mean Rates)

ma4$uw\_fig



Difference between baseline rate and 2021 rate is statistically significant after conducting a Wilcoxon Signed Rank Test (V = 144, p = 0.001).

###### Table B.24 Provider Measure Achievement: D1-503 PDI 91 Child Acute Composite Indicator

###### Summary Statistics by Year and Measure Achievement: Pediatric Quality Indicator 91: Child Acute Composite Indicator

m5$summary\_stats

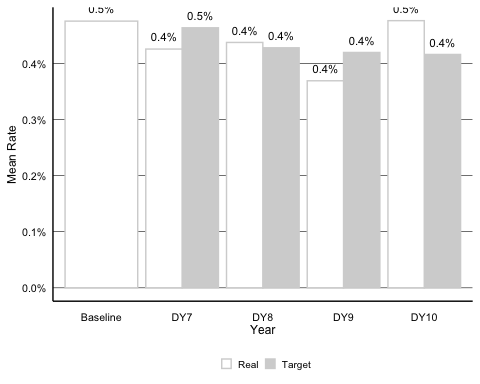
| Measure Achievement | DY7 (2018) # | DY7 % | DY8 (2019) # | DY8 % | DY9 (2020) # | DY9 % | DY10 (2021) # | DY10 % |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Not Met | 2 | 20 | - | - | - | - | - | - |
| Met | 8 | 80 | 8 | 80 | 8 | 80 | 6 | 60 |
| Partially Met | - | - | 2 | 20 | 2 | 20 | 4 | 40 |

Sample sizes for DY7 (n = 10), DY8 (n = 10), DY9 (n = 10), and DY10 (n = 10).

###### Figure B.6 Change in Unweighted Mean Rate: D1-503 PDI 91 Child Acute Composite Indicator

(Comparison of Real and Target Mean Rates)

ma5$uw\_fig



Difference between baseline rate and 2021 rate is not statistically significant after conducting a Wilcoxon Signed Rank Test (V = 26, p = 0.922).

###### Table B.25 Summary Statistics by Year: Potentially Preventable Admissions (PPA)

###### Summary Statistics by Year: 1.4.1 Potentially Preventable Admissions (PPA)

ppa\_summary\_stats

| Year | Sample Size | Unweighted Mean | Unweighted SD | Unweighted Median | Unweighted IQR | Weighted Mean | Weighted SD | Weighted Median | Weighted IQR |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 17 | 20 | 0.81 | 0.22 | 0.78 | 0.33 | 0.13 | 0.04 | 0.13 | 0 |
| 18 | 20 | 0.78 | 0.23 | 0.76 | 0.22 | 0.11 | 0.04 | 0.12 | 0 |
| 19 | 20 | 0.80 | 0.21 | 0.80 | 0.21 | 0.12 | 0.04 | 0.11 | 0 |
| 20 | 20 | 0.61 | 0.21 | 0.55 | 0.19 | 0.08 | 0.04 | 0.08 | 0 |

Difference between 2017 and 2020 unweighted rates is statistically significant after conducting a Paired Wilcoxon Signed Rank Test (V = 207, p < .05). Difference between 2017 and 2020 weighted rates is statistically significant after conducting a Paired Wilcoxon Signed Rank Test (V = 207, p < .05).

###### Table B.26 Summary Statistics by Year: Potentially Preventable Readmissions (PPR)

###### Summary Statistics by Year: 1.4.2 Potentially Preventable Readmissions (PPR)

ppr\_summary\_stats

| Year | Sample Size | Unweighted Mean | Unweighted SD | Unweighted Median | Unweighted IQR | Weighted Mean | Weighted SD | Weighted Median | Weighted IQR |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 17 | 20 | 33.88 | 10.93 | 32.85 | 11.46 | 55.38 | 15.79 | 52.64 | 22 |
| 18 | 20 | 35.67 | 10.58 | 33.98 | 12.47 | 61.37 | 16.52 | 61.49 | 19 |
| 19 | 20 | 38.80 | 11.71 | 37.38 | 12.15 | 62.47 | 16.97 | 61.79 | 22 |
| 20 | 20 | 36.07 | 12.81 | 34.07 | 15.78 | 39.45 | 12.16 | 37.89 | 14 |

Difference between 2017 and 2020 unweighted rates is not statistically significant after conducting a Paired Wilcoxon Signed Rank Test (V = 79, p = 0.348810195922852). Difference between 2017 and 2020 weighted rates is statistically significant after conducting a Paired Wilcoxon Signed Rank Test (V = 206, p < .05).

###### Table B.27 Summary Statistics by Year: Potentially Preventable Complications (PPC)

###### Summary Statistics by Year: 1.4.3 Potentially Preventable Complications (PPC)

ppc\_summary\_stats

| Year | Sample Size | Unweighted Mean | Unweighted SD | Unweighted Median | Unweighted IQR | Weighted Mean | Weighted SD | Weighted Median | Weighted IQR |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 17 | 20 | 18.21 | 3.71 | 19.05 | 4.63 | 17.55 | 3.70 | 18.26 | 5 |
| 18 | 20 | 12.66 | 2.47 | 12.84 | 3.46 | 9.89 | 2.17 | 9.69 | 3 |
| 19 | 20 | 13.14 | 3.46 | 13.57 | 3.89 | 10.10 | 2.58 | 10.28 | 3 |
| 20 | 20 | 13.07 | 3.19 | 13.94 | 3.87 | 10.48 | 2.69 | 10.97 | 3 |

Difference between 2017 and 2020 unweighted rates is statistically significant after conducting a Paired Wilcoxon Signed Rank Test (V = 198, p < .05). Difference between 2017 and 2020 weighted rates is statistically significant after conducting a Paired Wilcoxon Signed Rank Test (V = 207, p < .05).

###### Table B.28 Summary Statistics by Year: Potentially Preventable Emergency Department Visits (PPV)

###### Summary Statistics by Year: 1.4.4 Potentially Preventable Emergency Deparment visits (PPV)

ppv\_summary\_stats

| Year | Sample Size | Unweighted Mean | Unweighted SD | Unweighted Median | Unweighted IQR | Weighted Mean | Weighted SD | Weighted Median | Weighted IQR |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 17 | 20 | 33.48 | 6.44 | 34.56 | 6.52 | 18.09 | 3.82 | 19.08 | 3 |
| 18 | 20 | 31.57 | 5.32 | 31.35 | 7.07 | 16.88 | 3.27 | 16.85 | 4 |
| 19 | 20 | 32.19 | 6.08 | 32.73 | 6.43 | 17.31 | 3.52 | 17.52 | 4 |
| 20 | 20 | 20.33 | 4.26 | 20.32 | 3.51 | 9.95 | 2.24 | 9.73 | 1 |

Difference between 2017 and 2020 unweighted rates is statistically significant after conducting a Paired Wilcoxon Signed Rank Test (V = 210, p < .05). Difference between 2017 and 2020 weighted rates is statistically significant after conducting a Paired Wilcoxon Signed Rank Test (V = 210, p < .05).